

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

ADDRESS (number and street) ▼

PO BOX 295

☐ Check if different than previously reported. (ACC)

CHRISTIANSTED

VI

00821

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00553560

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

11

04

2014

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

10

01

2014

10

15

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer SCOTT B MACKENZIE

Signature of Treasurer

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

10

20

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 01 / 2014 To: M M / D D / Y Y Y Y Y 10 / 15 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		12637.04
(b) Cash on Hand at Beginning of Reporting Period.....	61695.32	
(c) Total Receipts (from Line 19)	91666.68	871047.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	153362.00	883684.29
7. Total Disbursements (from Line 31)	123284.56	853606.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	30077.44	30077.44
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	224727.63	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Report Covering the Period:

From:

M M /

D D /

Y Y Y Y Y

10 01 2014

To:

M M /

D D /

Y Y Y Y Y

10 15 2014

I. Receipts**COLUMN A**
Total This Period**COLUMN B**
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

23380.00

184861.00

(ii) Unitemized

68232.68

685629.25

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

91612.68

870490.25

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

91612.68

870490.25

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

54.00

557.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

91666.68

871047.25

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

91666.68

871047.25

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	88284.56	754256.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	88284.56	754256.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	20850.80
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	39500.00
24. Independent Expenditures (use Schedule E)	32000.00	32000.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	7000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	123284.56	853606.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	123284.56	853606.85

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	91612.68	870490.25
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	91612.68	870490.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	88284.56	754256.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	54.00	557.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	88230.56	753699.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR OSCAR ANDERSON 493

Mailing Address 65 IDA RED AVE APT 108

City
SPARTA

State Zip Code
MI 49345

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.42422

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. MR OSCAR ANDERSON 493

Mailing Address 65 IDA RED AVE APT 108

City
SPARTA

State Zip Code
MI 49345

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45643

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MR GLEN ANDREWS 648

Mailing Address 14311 COUNTY ROAD 110

City
CARTHAGE

State Zip Code
MO 64836

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2014

Transaction ID : SA11AI.42437

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

215.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR GLEN ANDREWS 648

Mailing Address 14311 COUNTY ROAD 110

City

CARTHAGE

State

MO

Zip Code

64836

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

305.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45644

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MRS BONNIE AULD 926

Mailing Address 4019 CALLE SONORA ESTE UNIT B

City

LAGUNA WOODS

State

CA

Zip Code

92637

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

253.00

Date of Receipt

10 / 06 / 2014

Transaction ID : SA11AI.42467

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. MRS BONNIE AULD 926

Mailing Address 4019 CALLE SONORA ESTE UNIT B

City

LAGUNA WOODS

State

CA

Zip Code

92637

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

253.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45645

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS LAURA BARKER 472

Mailing Address 4922 W COUNTY ROAD 300 N

City

GREENSBURG

State

IN

Zip Code

47240

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.42519

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. MR JOHN D BASTOW 670

Mailing Address 2834 W 4TH AVE

City

EL DORADO

State

KS

Zip Code

67042

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.42541

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. MR JOHN D BASTOW 670

Mailing Address 2834 W 4TH AVE

City

EL DORADO

State

KS

Zip Code

67042

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45646

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

340.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOSEPH BAUER 488

Mailing Address 536 DORCHESTER DR

City

DIMONDALE

State

MI

Zip Code

48821

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.42546

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

B. MR JOSEPH BAUER 488

Mailing Address 536 DORCHESTER DR

City

DIMONDALE

State

MI

Zip Code

48821

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45647

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MR JOSEPH BAUER 488

Mailing Address 536 DORCHESTER DR

City

DIMONDALE

State

MI

Zip Code

48821

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45649

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS HELEN BEAVER 140

Mailing Address 1737 SENECA RD

City State Zip Code
 LAWTONS NY 14091

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 02 2014

Transaction ID : SA11AI.42557

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MR HERBERT BECKER 629

Mailing Address 1133 UNION SCHOOL RD

City State Zip Code
 AVA IL 62907

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 06 2014

Transaction ID : SA11AI.42561

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. DR HANS BERGSTROM 334

Mailing Address 2612 SW 15TH ST

City State Zip Code
 DEERFIELD BCH FL 33442

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PROFESSOR & WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 14 2014

Transaction ID : SA11AI.42597

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. YVONNE BERRY 112

Mailing Address 1019 VAN SICLEN AVE APT 5J

City State Zip Code
BROOKLYN NY 11207

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.42602

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. YVONNE BERRY 112

Mailing Address 1019 VAN SICLEN AVE APT 5J

City State Zip Code
BROOKLYN NY 11207

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45650

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MS LITA BIEJO 930

Mailing Address 9555 W LOS ANGELES AVE

City State Zip Code
MOORPARK CA 93021

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11AI.42616

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. JOHN W BOERSTLER 804

Mailing Address PO BOX 792

City

BRECKENRIDGE

State

CO

Zip Code

80424

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.42651

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. MR WALLIS BOLTON 064

Mailing Address 83 ASHLAR VLG

City

WALLINGFORD

State

CT

Zip Code

06492

FEC ID number of contributing
federal political committee.

C

Name of Employer

BOLTON ENTERPRISES SOUTH LLC

Occupation

PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.42658

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. MR WALLIS BOLTON 064

Mailing Address 83 ASHLAR VLG

City

WALLINGFORD

State

CT

Zip Code

06492

FEC ID number of contributing
federal political committee.

C

Name of Employer

BOLTON ENTERPRISES SOUTH LLC

Occupation

PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45651

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DELIGHT S BONNER 739

Mailing Address 1430 RIMROCK DR

City
GUYMON

State Zip Code
OK 73942

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.42662

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

B. MR JOHN BOWE 321

Mailing Address 2135 SPRINGWATER LN

City
PORT ORANGE

State Zip Code
FL 32128

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2014

Transaction ID : SA11AI.42678

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. MR JOHN BOWE 321

Mailing Address 2135 SPRINGWATER LN

City
PORT ORANGE

State Zip Code
FL 32128

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45652

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR HAROLD BRIGHAM 631

Mailing Address 4 NARRAGANSETT DR

City

SAINT LOUIS

State

MO

Zip Code

63124

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11AI.42717

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. MR JAMES P BROOKS 986

Mailing Address 4320 NE 261ST AVE

City

CAMAS

State

WA

Zip Code

98607

FEC ID number of contributing
federal political committee.

C

Name of Employer

FARMER

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45653

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MR HAROLD G BROWN 670

Mailing Address 1336 WALNUT ST

City

KINGMAN

State

KS

Zip Code

67068

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2014

Transaction ID : SA11AI.42744

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS ELIZABETH BRYDEN 100

Mailing Address 1 W 67TH ST APT 611

City
NEW YORK

State Zip Code
NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.00

Date of Receipt

10 / 10 / 2014

Transaction ID : SA11AI.42757

Amount of Each Receipt this Period

233.00

Full Name (Last, First, Middle Initial)

B. MR ROBERT W BURKS 079

Mailing Address 13 BIRCH HILL DR

City
CHATHAM

State Zip Code
NJ 07928

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 08 / 2014

Transaction ID : SA11AI.42772

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. DR GEORGE BUZBY 194 JR

Mailing Address 997 STONYBROOK DR

City
BLUE BELL

State Zip Code
PA 19422

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 09 / 2014

Transaction ID : SA11AI.42799

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

683.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS DORTHEA CALLAWAY 598

Mailing Address 1111 ANGLERS BEND WAY

City State Zip Code
 MISSOULA MT 59802

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 14 2014

Transaction ID : SA11AI.42813

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. JAY CARTER 763

Mailing Address 1404 CHAPARRAL RD

City State Zip Code
 BURKBURNETT TX 76354

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARTER AVIATION TECHNOLOGIS

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 14 2014

Transaction ID : SA11AI.42841

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. MR JOHN CERVIN 210 JR

Mailing Address 815A HILLTOP AVE EXT

City State Zip Code
 ABINGDON MD 21009

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 01 2014

Transaction ID : SA11AI.42869

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

295.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS CAROL CHAUSSEE 980

Mailing Address 7524 118TH AVE NE

City

KIRKLAND

State

WA

Zip Code

98033

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

10 / 10 / 2014

Transaction ID : SA11AI.42877

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

B. DICEY S CHILDERS 350

Mailing Address 8517 JOY RD

City

BLOUNTSVILLE

State

AL

Zip Code

35031

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE ALABASTER BOX

Occupation

CHRISTIAN BOOKSTORE OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.42885

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. MR DONALD R CLARK 010

Mailing Address 145 GRANVILLE RD

City

WESTFIELD

State

MA

Zip Code

01085

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 02 / 2014

Transaction ID : SA11AI.42905

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

975.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. KIRK CLARK 785

Mailing Address PO BOX 938

City
MCALLEN

State
TX

Zip Code
78505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2014

Transaction ID : SA11AI.42911

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. MR EDWARD CLARKE 068

Mailing Address 50 LEDGE RD APT 127

City
DARIEN

State
CT

Zip Code
06820

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11AI.42920

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. MRS ELEANOR COBB 900

Mailing Address 131 S VISTA ST

City
LOS ANGELES

State
CA

Zip Code
90036

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11AI.42932

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

950.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR EDWIN COHEN 100

Mailing Address 25 SUTTON PL S APT 16G

City State Zip Code
 NEW YORK NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.42942

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. MS MARY K COLWELL 453

Mailing Address 140 MARICOPA CIR

City State Zip Code
 ENON OH 45323

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1245.00

Date of Receipt

10 / 01 / 2014

Transaction ID : SA11AI.42952

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

C. MR NICHOLAS CONCA 284

Mailing Address 6 DEERWOOD CIR

City State Zip Code
 OAK ISLAND NC 28465

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

10 / 08 / 2014

Transaction ID : SA11AI.42954

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. JAMES G COSTELLO 341

Mailing Address 10951 GULF SHORE DR

City
NAPLES

State Zip Code
FL 34108

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 01 / 2014

Transaction ID : SA11AI.42986

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. MR DONALD CRAWFORD 194

Mailing Address PO BOX 3003

City
BLUE BELL

State Zip Code
PA 19422

FEC ID number of contributing
federal political committee.

C

Name of Employer

CRAWFORD BROADCASTING CO

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.43003

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. MR DONALD CRAWFORD 194

Mailing Address PO BOX 3003

City
BLUE BELL

State Zip Code
PA 19422

FEC ID number of contributing
federal political committee.

C

Name of Employer

CRAWFORD BROADCASTING CO

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45654

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JAMES L CROWLEY 134

Mailing Address 415 W HAMILTON AVE

City
SHERRILL

State Zip Code
NY 13461

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

10 / 01 / 2014

Transaction ID : SA11AI.43020

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. MRS GWEN S CRYAN 956

Mailing Address 166 LEMON TREE CIR

City
VACAVILLE

State Zip Code
CA 95687

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

10 / 02 / 2014

Transaction ID : SA11AI.43022

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. MRS MAXINE DALTON 851

Mailing Address 220 W SUNSET DR

City
SUPERIOR

State Zip Code
AZ 85173

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45655

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR PAUL DECLEVA 752

Mailing Address 5222 DELOACHE AVE

City State Zip Code
DALLAS TX 75220

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.43083

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MRS VIRGINIA DEKKER 287

Mailing Address 24 IROQUOIS DR

City State Zip Code
HENDERSONVILLE NC 28791

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 06 / 2014

Transaction ID : SA11AI.43090

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. MR GONZALO DIAZ 331

Mailing Address 5520 SW 72ND AVE

City State Zip Code
MIAMI FL 33155

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 10 / 2014

Transaction ID : SA11AI.43108

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JAMES DOTINGA 982

Mailing Address 4026 SALT SPRING DR

City State Zip Code
 FERNDAL WA 98248

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

APARTMENT MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

MM / DD / YYYY
 10 / 02 / 2014

Transaction ID : SA11AI.43157

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MRS MARTHA L DOWNS 956

Mailing Address 8560 JESTER CT

City State Zip Code
 ELK GROVE CA 95624

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

MM / DD / YYYY
 10 / 02 / 2014

Transaction ID : SA11AI.43171

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. MRS MARTHA L DOWNS 956

Mailing Address 8560 JESTER CT

City State Zip Code
 ELK GROVE CA 95624

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

MM / DD / YYYY
 10 / 03 / 2014

Transaction ID : SA11AI.43170

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR HAROLD DUKE 373

Mailing Address 15 SAGELY LN

City

MANCHESTER

State

TN

Zip Code

37355

FEC ID number of contributing federal political committee.

C

Name of Employer

USPS

Occupation

RURAL LETTER CARRIER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11AI.43190

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. MR MICHAEL DYCKMAN 117

Mailing Address 4 MAJESTIC CT

City

DIX HILLS

State

NY

Zip Code

11746

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : SA11AI.43201

Amount of Each Receipt this Period

106.00

Full Name (Last, First, Middle Initial)

C. MR GARY ELLIS 456

Mailing Address 2150 COUNTY ROAD 411

City

PROCTORVILLE

State

OH

Zip Code

45669

FEC ID number of contributing federal political committee.

C

Name of Employer

MORIMURA CHEMICALS LTD

Occupation

CHEMIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

Transaction ID : SA11AI.43232

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

556.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS JEAN ENGLAND 614

Mailing Address 576 KNOX ROAD 1300 E

City
MAQUON

State Zip Code
IL 61458

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2014

Transaction ID : SA11AI.43239

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MR CLIFFORD L EPSTEIN 335

Mailing Address 18823 AVENUE BIARRITZ

City
LUTZ

State Zip Code
FL 33558

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETAIL PROCESSING ENGINEERING CO

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11AI.43245

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. MR CLIFFORD L EPSTEIN 335

Mailing Address 18823 AVENUE BIARRITZ

City
LUTZ

State Zip Code
FL 33558

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETAIL PROCESSING ENGINEERING CO

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11AI.43246

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 96
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CLIFFORD L EPSTEIN 335

Mailing Address 18823 AVENUE BIARRITZ

City State Zip Code
LUTZ FL 33558

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETAIL PROCESSING ENGINEERING CO

Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45656

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MR JAMES R FETTER 177 JR

Mailing Address PO BOX 205

City State Zip Code
MUNCY PA 17756

FEC ID number of contributing
federal political committee.

C

Name of Employer
MUNCY MACHINE & TOOL CO

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11AI.43294

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. MRS LORRAINE FINCH 930

Mailing Address 701 N MONTGOMERY ST

City State Zip Code
OJAI CA 93023

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.43296

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

285.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS LORRAINE FINCH 930

Mailing Address 701 N MONTGOMERY ST

City State Zip Code
 OJAI CA 93023

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

10 / 09 / 2014

Transaction ID : SA11AI.43295

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. MRS LORRAINE FINCH 930

Mailing Address 701 N MONTGOMERY ST

City State Zip Code
 OJAI CA 93023

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45657

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MR DONALD FITZGERALD 217

Mailing Address PO BOX 75

City State Zip Code
 THURMONT MD 21788

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

10 / 06 / 2014

Transaction ID : SA11AI.43307

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 96

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DONALD FITZGERALD 217

Mailing Address PO BOX 75

City
THURMONTState Zip Code
MD 21788FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2014

Transaction ID : SA11AI.45660

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. JAMES H FOSTER 290

Mailing Address 203 OLD CHAPIN RD

City
LEXINGTONState Zip Code
SC 29072FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		08		2014

Transaction ID : SA11AI.43324

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. LORA FROBERG 498

Mailing Address 12938 T RD

City
RAPID RIVERState Zip Code
MI 49878FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2014

Transaction ID : SA11AI.43349

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. LORA FROBERG 498

Mailing Address 12938 T RD

City

RAPID RIVER

State

MI

Zip Code

49878

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2014

Transaction ID : SA11AI.43348

Amount of Each Receipt this Period

53.00

Full Name (Last, First, Middle Initial)

B. MRS BETTY GARDNER 648

Mailing Address 1572 GOODIN HOLLOW RD

City

NOEL

State

MO

Zip Code

64854

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.43390

Amount of Each Receipt this Period

105.00

Full Name (Last, First, Middle Initial)

C. MR ALONZO GATES 782

Mailing Address 785 BURR RD

City

SAN ANTONIO

State

TX

Zip Code

78209

FEC ID number of contributing
federal political committee.

C

Name of Employer

ARTS SAN ANTONIO

Occupation

DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.43394

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

2658.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CHARLES GORDER 921 SR

Mailing Address 5526 TOYON RD

City

SAN DIEGO

State

CA

Zip Code

92115

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.43459

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MR CHARLES GORDER 921 SR

Mailing Address 5526 TOYON RD

City

SAN DIEGO

State

CA

Zip Code

92115

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.43460

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. MR RICHARD S GRIFFITH 770

Mailing Address 3417 MILAM ST

City

HOUSTON

State

TX

Zip Code

77002

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.43492

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

350.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MYRNA HACKNEY 980

Mailing Address 13355 SE 43RD PL

City	State	Zip Code
BELLEVUE	WA	98006

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.45661

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MRS MARJORIE HAILEY 668

Mailing Address 720 S NEOSHO ST

City	State	Zip Code
COUNCIL GROVE	KS	66846

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2014

Transaction ID : SA11AI.43528

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. MR KERN HAMILTON 950

Mailing Address 800 BLOSSOM HILL RD UNIT E324

City	State	Zip Code
LOS GATOS	CA	95032

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2014

Transaction ID : SA11AI.43535

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ROBERT K HANING 432

Mailing Address 5675 PONDEROSA DR #315

City	State	Zip Code
COLUMBUS	OH	43231

FEC ID number of contributing federal political committee.

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2014

Transaction ID : SA11AI.43540

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. MRS JEANETTE HARTJC 635

Mailing Address 1606 RANDALL DR

City	State	Zip Code
KIRKSVILLE	MO	63501

FEC ID number of contributing federal political committee.

Name of Employer

Occupation

BRP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2014

Transaction ID : SA11AI.43556

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. ARLEY R HARTSOCH 588

Mailing Address 5505 113TH DR NW

City	State	Zip Code
RAY	ND	58849

FEC ID number of contributing federal political committee.

Name of Employer

Occupation

SELF EMPLOYED

CATTLE RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2014

Transaction ID : SA11AI.43561

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. ARLEY R HARTSOCH 588

Mailing Address 5505 113TH DR NW

City State Zip Code
 RAY ND 58849

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CATTLE RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.45662

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MRS ELIZABETH R HASKINS 244

Mailing Address 150 FOREST HILL VW

City State Zip Code
 LEXINGTON VA 24450

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 01 / 2014

Transaction ID : SA11AI.43566

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. MRS ELIZABETH R HASKINS 244

Mailing Address 150 FOREST HILL VW

City State Zip Code
 LEXINGTON VA 24450

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11AI.43565

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS ELLA M HELM 300

Mailing Address 3385 HALLMARK DR SE

City

MARIETTA

State

GA

Zip Code

30067

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11AI.43605

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MRS SHIRLEY H HENDERSON 970

Mailing Address PO BOX 787

City

BEAVERCREEK

State

OR

Zip Code

97004

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOUSEWIFE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.43612

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

C. MS MARGARET A HICKS 442

Mailing Address 586 FAIRWOOD DR

City

TALLMADGE

State

OH

Zip Code

44278

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11AI.43638

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS MARGARET A HICKS 442

Mailing Address 586 FAIRWOOD DR

City
TALLMADGE

State Zip Code
OH 44278

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11AI.43639

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

B. MR BILL HOLDEN 956

Mailing Address 4467 PLANTATION DR

City
FAIR OAKS

State Zip Code
CA 95628

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11AI.43678

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. MRS MARTHA L HUTCHISON 895

Mailing Address 2330 CROWS NEST PKWY

City
RENO

State Zip Code
NV 89519

FEC ID number of contributing
federal political committee.

C

Name of Employer

HUTCH'S CAR WASHES, INC

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.43732

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

295.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS ELIZABETH JACKSON 630

Mailing Address 724 CLAYTON CORNERS DR

City State Zip Code
 BALLWIN MO 63011

FEC ID number of contributing
federal political committee.

C

Name of Employer
 PFIZER MONSANTO

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.43757

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. DURK JAGER 294

Mailing Address 69 OTTER IS

City State Zip Code
 JOHNS ISLAND SC 29455

FEC ID number of contributing
federal political committee.

C

Name of Employer
 KIAWAH CONSERVANCY

Occupation
 TRUSTEE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.45663

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MRS BARBARA A JARVIS 770

Mailing Address 13923 DUNCANNON DR

City State Zip Code
 HOUSTON TX 77015

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11AI.43770

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR TERRY JOHNSON 113

Mailing Address 7535 UTOPIA PKWY

City
FLUSHING

State Zip Code
NY 11366

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.43784

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. DR WILLIAM H JOHNSON 339 DDS

Mailing Address 13691 METROPOLIS PKWY STE 250

City
FORT MYERS

State Zip Code
FL 33912

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2014

Transaction ID : SA11AI.43793

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. MR LYNN P JOHNSON 490

Mailing Address 349 BURR ST

City
BATTLE CREEK

State Zip Code
MI 49015

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.43795

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR LYNN P JOHNSON 490

Mailing Address 349 BURR ST

City

BATTLE CREEK

State

MI

Zip Code

49015

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45664

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MR THEODORE JOHNSON 628

Mailing Address 120 JOHNSON LN

City

CROSSVILLE

State

IL

Zip Code

62827

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOHNSON FARMS

Occupation

PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

10 / 02 / 2014

Transaction ID : SA11AI.43801

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. MR JOHN A JOST 598

Mailing Address 1531 SLEEPING CHILD RD

City

HAMILTON

State

MT

Zip Code

59840

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

10 / 06 / 2014

Transaction ID : SA11AI.43826

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DR MARGARET H KANTES 189

Mailing Address 53 AVALON CT

City

DOYLESTOWN

State

PA

Zip Code

18901

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 01 / 2014

Transaction ID : SA11AI.43851

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MRS JOY KANTNER 458

Mailing Address 16075 WAPAKONETA FISHER RD

City

WAPAKONETA

State

OH

Zip Code

45895

FEC ID number of contributing
federal political committee.

C

Name of Employer

AIP LOGISTICS INC

Occupation

CORPORATE SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

10 / 03 / 2014

Transaction ID : SA11AI.43854

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. MR WILLIAM E KEELER 674

Mailing Address 516 SUNSET DR

City

SALINA

State

KS

Zip Code

67401

FEC ID number of contributing
federal political committee.

C

Name of Employer

OFFICE OF NAVAL AFFAIRS

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.43864

Amount of Each Receipt this Period

12.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

162.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. YVONNE M KNAEBEL 365

Mailing Address 9638 PERDIDO VISTA DR

City	State	Zip Code
PERDIDO BEACH	AL	36530

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2014

Transaction ID : SA11AI.43928

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. YVONNE M KNAEBEL 365

Mailing Address 9638 PERDIDO VISTA DR

City	State	Zip Code
PERDIDO BEACH	AL	36530

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.45665

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. DR FRANK A KREWET 631 III MD

Mailing Address 12538 WINDMOOR PL

City	State	Zip Code
SAINT LOUIS	MO	63131

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2014

Transaction ID : SA11AI.43985

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. JEAN M LAMB 836

Mailing Address 2814 S ILLINOIS AVE

 City
 CALDWELL

 State
 ID

 Zip Code
 83605

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : SA11AI.44015

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. MS HILMA A LEVIS 775

Mailing Address 6901 AVE E

 City
 SANTA FE

 State
 TX

 Zip Code
 77510

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.44081

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. MS PHYLLIS O LEWELLYN 300

Mailing Address 1125 TIMBERLAND DR SE

 City
 MARIETTA

 State
 GA

 Zip Code
 30067

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : SA11AI.44083

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS MARJORIE R LINDSEY 933

Mailing Address 10202 DUTCH IRIS DR

City State Zip Code
 BAKERSFIELD CA 93311

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11AI.44095

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. MR JERRY J LOBLEY 790

Mailing Address PO BOX 277

City State Zip Code
 TEXLINE TX 79087

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

WHOLESALE GRAIN DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA11AI.44105

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. DR WALTER LUNG 968 DDS

Mailing Address 4244 HUANUI ST

City State Zip Code
 HONOLULU HI 96816

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11AI.44134

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS LAURIE J MACKEY 325

Mailing Address 4396 WINDLAKE DR

City State Zip Code
 NICEVILLE FL 32578

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.45666

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MRS RUTH MARK 465

Mailing Address 1811 WOODGATE DR

City State Zip Code
 GOSHEN IN 46526

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11AI.44181

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. MR RICHARD MARX 125

Mailing Address PO BOX 440

City State Zip Code
 WAPPINGERS FALLS NY 12590

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.44195

Amount of Each Receipt this Period

152.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

177.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. ROBERT A MAY 826

Mailing Address 2322 S POPLAR ST

City
CASPERState Zip Code
WY 82601FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2014

Transaction ID : SA11AI.44213

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

B. MS KATHLEEN E MCCARTHY 894

Mailing Address PO BOX 917

City
VIRGINIA CITYState Zip Code
NV 89440FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2014

Transaction ID : SA11AI.45667

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MR DAVID A MCCORMICK 370

Mailing Address 824 MOORES CT

City
BRENTWOODState Zip Code
TN 37027FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		06		2014

Transaction ID : SA11AI.44225

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOHN MCCRILLIS 037

Mailing Address PO BOX 458

City
NEWPORT

State Zip Code
NH 03773

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 10 / 2014

Transaction ID : SA11AI.44228

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. MR ELLSWORTH MCKEE 373

Mailing Address PO BOX 567

City
COLLEGEDALE

State Zip Code
TN 37315

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCKEE FOODS CORP

Occupation

CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 06 / 2014

Transaction ID : SA11AI.44255

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. MR JAMES L MCKINSEY 173

Mailing Address PO BOX 369

City
WINDSOR

State Zip Code
PA 17366

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 06 / 2014

Transaction ID : SA11AI.44269

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

680.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JAMES L MCKINSEY 173

Mailing Address PO BOX 369

City
WINDSOR

State Zip Code
PA 17366

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45668

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MISS SUSAN MCMASTER 906

Mailing Address 14921 ROMA DR

City
LA MIRADA

State Zip Code
CA 90638

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDUCATION FIELD

Occupation

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.44278

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. MISS SUSAN MCMASTER 906

Mailing Address 14921 ROMA DR

City
LA MIRADA

State Zip Code
CA 90638

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDUCATION FIELD

Occupation

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 07 / 2014

Transaction ID : SA11AI.44277

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS SUSAN MCMASTER 906

Mailing Address 14921 ROMA DR

City

LA MIRADA

State

CA

Zip Code

90638

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDUCATION FIELD

Occupation

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

10 / 09 / 2014

Transaction ID : SA11AI.44276

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MISS SUSAN MCMASTER 906

Mailing Address 14921 ROMA DR

City

LA MIRADA

State

CA

Zip Code

90638

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDUCATION FIELD

Occupation

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.44275

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. BURTON MCPHEETERS 691

Mailing Address 23998 S MCPHEETERS RD

City

GOTHENBURG

State

NE

Zip Code

69138

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

10 / 06 / 2014

Transaction ID : SA11AI.44286

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JEFFREY MEADOR 809

Mailing Address 2210 BENNETT AVE

City	State	Zip Code
COLORADO SPRINGS	CO	80909

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.45669

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MS LUBA N MELNYK 113

Mailing Address 8132 DONGAN AVE

City	State	Zip Code
ELMHURST	NY	11373

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2014

Transaction ID : SA11AI.44304

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. MR ARTHUR MICHELETTI 940

Mailing Address 25380 BECKY LN

City	State	Zip Code
LOS ALTOS HILLS	CA	94022

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2014

Transaction ID : SA11AI.44326

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

350.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ARTHUR MICHELETTI 940

Mailing Address 25380 BECKY LN

City State Zip Code
 LOS ALTOS HILLS CA 94022

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.44325

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MRS JOAN G MILAM 333

Mailing Address 2673 CENTER COURT DR

City State Zip Code
 WESTON FL 33332

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11AI.44329

Amount of Each Receipt this Period

113.00

Full Name (Last, First, Middle Initial)

C. MR FRANCIS D MILISTEFR 939

Mailing Address 8020 RIVER PL

City State Zip Code
 CARMEL CA 93923

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11AI.44334

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

263.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR LEROY E MILLER 453

Mailing Address 429 SKYLAND DR

City
BELLBROOK

State Zip Code
OH 45305

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.44343

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. RICHARD MOLDT 134

Mailing Address 9732 DEERPATH CIR

City
MARCY

State Zip Code
NY 13403

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 03 / 2014

Transaction ID : SA11AI.44364

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. MR JACK W MOORE 857

Mailing Address 64301 E SQUASH BLOSSOM LN

City
TUCSON

State Zip Code
AZ 85739

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

10 / 01 / 2014

Transaction ID : SA11AI.44380

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CLAIR J MURPHY 551

Mailing Address 1626 RUTH ST N

City
SAINT PAUL

State Zip Code
MN 55119

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

MM / DD / YYYY
10 / 07 / 2014

Transaction ID : SA11AI.44422

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. COL JOHN E MURRAY 782

Mailing Address 10000 RHINELAND #218

City
SAN ANTONIO

State Zip Code
TX 78239

FEC ID number of contributing
federal political committee.

C

Name of Employer

US MILITARY

Occupation

OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
10 / 03 / 2014

Transaction ID : SA11AI.44425

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. MR ROBERT NEIGHBORS 358

Mailing Address 1205 HERMITAGE AVE SE

City
HUNTSVILLE

State Zip Code
AL 35801

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SA11AI.44451

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ROBERT NEIGHBORS 358

Mailing Address 1205 HERMITAGE AVE SE

City
HUNTSVILLE

State Zip Code
AL 35801

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.44450

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. MR JOSEPH HOWARD NIMO 336

Mailing Address 14003 NORTHTOWN CT APT B

City
TAMPA

State Zip Code
FL 33613

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.44484

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. DONALD NOVEY 486

Mailing Address 5163 MANGROVE DR

City
SAGINAW

State Zip Code
MI 48603

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 06 / 2014

Transaction ID : SA11AI.44502

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

345.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CECIL O'BRATE 678

Mailing Address PO BOX 399

City

GARDEN CITY

State

KS

Zip Code

67846

FEC ID number of contributing
federal political committee.

C

Name of Employer

PALMER MFG & TANK INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2014

Transaction ID : SA11AI.44510

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MR JOSEPH OLIVIER 341

Mailing Address 590 CLUB MARCO CIR UNIT 202

City

MARCO ISLAND

State

FL

Zip Code

34145

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOEY'S PIZZA

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45670

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MISS EDITH P PALMER 109

Mailing Address 282 LAROE RD

City

CHESTER

State

NY

Zip Code

10918

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11AI.44559

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS JANE PASTELAK 194

Mailing Address 1192 LAURELWOOD RD

City

POTTSTOWN

State

PA

Zip Code

19465

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2014

Transaction ID : SA11AI.44590

Amount of Each Receipt this Period

113.00

Full Name (Last, First, Middle Initial)

B. MR CHARLES PAULSEN 958

Mailing Address 1220 FAY CIR

City

SACRAMENTO

State

CA

Zip Code

95831

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		02		2014

Transaction ID : SA11AI.44599

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. MR CHARLES PAULSEN 958

Mailing Address 1220 FAY CIR

City

SACRAMENTO

State

CA

Zip Code

95831

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2014

Transaction ID : SA11AI.45671

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

188.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MARY PEDLEY 278

Mailing Address 914 W 3RD ST

City
WASHINGTON

State Zip Code
NC 27889

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45672

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MRS CATHERINE G PERCY 934

Mailing Address 757 HILLSIDE DR

City
SOLVANG

State Zip Code
CA 93463

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11AI.44621

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. MRS DUSKA E POWELL 925

Mailing Address 2548 APPLE TREE ST

City
HEMET

State Zip Code
CA 92545

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2014

Transaction ID : SA11AI.44693

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS ELEANOR S RAHE 432

Mailing Address 6045 BARBERRY HOLW

City State Zip Code
 COLUMBUS OH 43213

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA11AI.44715

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. MS CLAIRE RAINS 941

Mailing Address 420 41ST AVE

City State Zip Code
 SAN FRANCISCO CA 94121

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11AI.44716

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. MR IRWIN RASKIN 334

Mailing Address 8735 GRASSY ISLE TRL

City State Zip Code
 LAKE WORTH FL 33467

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA11AI.44721

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS ELEANOR L RATHS 372

Mailing Address 1144 GRANNY WHITE CT

City

NASHVILLE

State

TN

Zip Code

37204

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 02 / 2014

Transaction ID : SA11AI.44728

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. MR RAYMOND R RAUSCH 607

Mailing Address 1616 N 76TH CT

City

ELMWOOD PARK

State

IL

Zip Code

60707

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 03 / 2014

Transaction ID : SA11AI.44729

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. MR RAYMOND R RAUSCH 607

Mailing Address 1616 N 76TH CT

City

ELMWOOD PARK

State

IL

Zip Code

60707

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45673

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. GLENN REINDERS 530

Mailing Address 3479 SHERMAN RD

City
JACKSON

State Zip Code
WI 53037

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 10 / 2014

Transaction ID : SA11AI.44749

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. MS CAROLINE RICE 986

Mailing Address 2806 SE BALBOA DR

City
VANCOUVER

State Zip Code
WA 98683

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45674

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MR JOSEPH J RIDOLFO 060

Mailing Address 1100 POQUONOCK AVE

City
WINDSOR

State Zip Code
CT 06095

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

10 / 02 / 2014

Transaction ID : SA11AI.44769

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOSEPH J RIDOLFO 060

Mailing Address 1100 POQUONOCK AVE

City State Zip Code
WINDSOR CT 06095

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.44770

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. MELVIN A RIES 954

Mailing Address 3585 ROUND BARN BLVD APT 329

City State Zip Code
SANTA ROSA CA 95403

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2014

Transaction ID : SA11AI.44776

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. MELVIN A RIES 954

Mailing Address 3585 ROUND BARN BLVD APT 329

City State Zip Code
SANTA ROSA CA 95403

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45675

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS KATHLEEN M ROBE 926

Mailing Address 2851 CAROB ST

City State Zip Code
 NEWPORT BEACH CA 92660

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.44801

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. MISS VIRGINIA ROUSH 949

Mailing Address 600 DEER VALLEY RD APT 2E

City State Zip Code
 SAN RAFAEL CA 94903

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11AI.44866

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. MISS VIRGINIA ROUSH 949

Mailing Address 600 DEER VALLEY RD APT 2E

City State Zip Code
 SAN RAFAEL CA 94903

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11AI.44867

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS VIRGINIA ROUSH 949

Mailing Address 600 DEER VALLEY RD APT 2E

City	State	Zip Code
SAN RAFAEL	CA	94903

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.45676

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MRS WILLIAM RYAN 535

Mailing Address 645 S RINGOLD ST

City	State	Zip Code
JANESVILLE	WI	53545

FEC ID number of contributing federal political committee.

C

Name of Employer

RYAN INC OF WISCONSIN

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.45677

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MR JOSEPH C SCHATTEMAN 296

Mailing Address 2 LATTICE PL

City	State	Zip Code
GREENVILLE	SC	29615

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2014

Transaction ID : SA11AI.44933

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 62 OF 96
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOSEPH C SCHATTEMAN 296

Mailing Address 2 LATTICE PL

City	State	Zip Code
GREENVILLE	SC	29615

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2014

Transaction ID : SA11AI.44934

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. FRANCES SCHMIDT 671

Mailing Address 1417 WILLOW RD

City	State	Zip Code
NEWTON	KS	67114

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.45678

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MR KENNETH H SCHROM 444

Mailing Address 1161 E 10TH ST

City	State	Zip Code
SALEM	OH	44460

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2014

Transaction ID : SA11AI.44964

Amount of Each Receipt this Period

113.00

SUBTOTAL of Receipts This Page (optional)..... ►

123.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR H RICHARD SCHUMACHER 101

Mailing Address 47 E 88TH ST

City

NEW YORK

State

NY

Zip Code

10128

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		01		2014

Transaction ID : SA11AI.44977

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. MR H RICHARD SCHUMACHER 101

Mailing Address 47 E 88TH ST

City

NEW YORK

State

NY

Zip Code

10128

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		03		2014

Transaction ID : SA11AI.44978

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. MS EVA F SCOTT 230

Mailing Address 15830 GOODES BRIDGE RD

City

AMELIA COURT HOUSE

State

VA

Zip Code

23002

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

SMALL BUSINESS OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		10		2014

Transaction ID : SA11AI.44985

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR NELSON M SEESE 228

Mailing Address 9 WILL LN

City	State	Zip Code
BRIDGEWATER	VA	22812

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2014

Transaction ID : SA11AI.45001

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MR NELSON M SEESE 228

Mailing Address 9 WILL LN

City	State	Zip Code
BRIDGEWATER	VA	22812

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.45679

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MR DEAN SIDBURY 273

Mailing Address 1436 TALBOT RD

City	State	Zip Code
PLEASANT GARDEN	NC	27313

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2014

Transaction ID : SA11AI.45041

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DEAN SIDBURY 273

Mailing Address 1436 TALBOT RD

City State Zip Code
 PLEASANT GARDEN NC 27313

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 15 2014

Transaction ID : SA11AI.45042

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. JACK SMITH 653

Mailing Address 177 BOUNDARY LN

City State Zip Code
 OTTERVILLE MO 65348

FEC ID number of contributing
federal political committee.

C

Name of Employer

FARMER

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 14 2014

Transaction ID : SA11AI.45094

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. JACK SMITH 653

Mailing Address 177 BOUNDARY LN

City State Zip Code
 OTTERVILLE MO 65348

FEC ID number of contributing
federal political committee.

C

Name of Employer

FARMER

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 15 2014

Transaction ID : SA11AI.45680

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS MARIAN SORENSEN 177

Mailing Address 201 S BROAD ST APT 28

City State Zip Code
 JERSEY SHORE PA 17740

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11AI.45127

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. MS MARIAN SORENSEN 177

Mailing Address 201 S BROAD ST APT 28

City State Zip Code
 JERSEY SHORE PA 17740

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.45681

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MR KEVIN STANLEY 467

Mailing Address 1885 S 445 E

City State Zip Code
 LAGRANGE IN 46761

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.45147

Amount of Each Receipt this Period

102.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

177.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOHN STASSI 919

Mailing Address 600 SHEFFIELD CT UNIT 40

City State Zip Code
CHULA VISTA CA 91910

FEC ID number of contributing
federal political committee.

C

Name of Employer
ITALIAN CATHOLIC FEDERATION

Occupation
TRUSTEE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 06 / 2014

Transaction ID : SA11AI.45158

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. MR ROGER STRETSON 502

Mailing Address 5760 GALLERY CT

City State Zip Code
WEST DES MOINES IA 50266

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 07 / 2014

Transaction ID : SA11AI.45207

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. MR ROGER STRETSON 502

Mailing Address 5760 GALLERY CT

City State Zip Code
WEST DES MOINES IA 50266

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45682

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 Detailed Summary Page

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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DONALD KEARN SURGEON 620

Mailing Address PO BOX 363

City	State	Zip Code
JERSEYVILLE	IL	62052

FEC ID number of contributing federal political committee.

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2014

Transaction ID : SA11AI.45232

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. MISS MARYJANE SZARZYNSKI 610

Mailing Address 240 MANCHESTER RD

City	State	Zip Code
SOUTH BELOIT	IL	61080

FEC ID number of contributing federal political committee.

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

Transaction ID : SA11AI.45253

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. MISS MARYJANE SZARZYNSKI 610

Mailing Address 240 MANCHESTER RD

City	State	Zip Code
SOUTH BELOIT	IL	61080

FEC ID number of contributing federal political committee.

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.45683

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. STANLEY TATE 331

Mailing Address 1175 NE 125TH ST STE 102

City State Zip Code
 NORTH MIAMI FL 33161

FEC ID number of contributing
federal political committee.

C

Name of Employer
 STANLEY TATE BUILDERS INC

Occupation
 OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11AI.45261

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. STANLEY TATE 331

Mailing Address 1175 NE 125TH ST STE 102

City State Zip Code
 NORTH MIAMI FL 33161

FEC ID number of contributing
federal political committee.

C

Name of Employer
 STANLEY TATE BUILDERS INC

Occupation
 OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.45684

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MRS LORRAINE THALER 309

Mailing Address 2074 HILLSINGER RD

City State Zip Code
 AUGUSTA GA 30904

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.45275

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS LORRAINE THALER 309

Mailing Address 2074 HILLSINGER RD

City	State	Zip Code
AUGUSTA	GA	30904

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.45687

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MS JEANNETTE L THERRIAULT 997

Mailing Address 2473 OLD RICHARDSON HWY

City	State	Zip Code
NORTH POLE	AK	99705

FEC ID number of contributing federal political committee.

C

Name of Employer

HECTORS WELDING

Occupation

OFFICE WORK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2014

Transaction ID : SA11AI.45276

Amount of Each Receipt this Period

53.00

Full Name (Last, First, Middle Initial)

C. MR LESLIE TOWNSEND 960

Mailing Address 180 FRANCISCAN TRL

City	State	Zip Code
REDDING	CA	96003

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2014

Transaction ID : SA11AI.45309

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

103.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS SALLY TUTTLE 342

Mailing Address 315 CIRCLEWOOD DR

 City
 VENICE

 State
 FL

 Zip Code
 34293

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		06		2014

Transaction ID : SA11AI.45338

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. MR CALVIN K UPP 671

Mailing Address 212 E ELM ST

 City
 WELLINGTON

 State
 KS

 Zip Code
 67152

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		06		2014

Transaction ID : SA11AI.45344

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. MR CALVIN K UPP 671

Mailing Address 212 E ELM ST

 City
 WELLINGTON

 State
 KS

 Zip Code
 67152

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		10		2014

Transaction ID : SA11AI.45345

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS SHIRLEY A VANDEVERE 443

Mailing Address 3201 CORMANY RD

City State Zip Code
 AKRON OH 44319

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.45372

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. MRS SHIRLEY A VANDEVERE 443

Mailing Address 3201 CORMANY RD

City State Zip Code
 AKRON OH 44319

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.45689

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. MR JACK VANHATTEM 604

Mailing Address 10556 W LA PORTE RD

City State Zip Code
 MOKENA IL 60448

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.45373

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR HARRY VAN IDERSTINE 321

Mailing Address 812 S TIMBERLANE DR

City State Zip Code
 NEW SMYRNA BEACH FL 32168

FEC ID number of contributing
federal political committee.

C

Name of Employer
 SHEIDOW BRONZE CORP

Occupation
 DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.45688

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MR KENNETH C WALDO 276 JR

Mailing Address 1000 DEERFIELD RD

City State Zip Code
 RALEIGH NC 27609

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

10 / 09 / 2014

Transaction ID : SA11AI.45403

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. MS ELLEN WALKER 648

Mailing Address PO BOX 26

City State Zip Code
 GRANBY MO 64844

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

10 / 14 / 2014

Transaction ID : SA11AI.45406

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS ELLEN WALKER 648

Mailing Address PO BOX 26

City State Zip Code
 GRANBY MO 64844

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 15 2014

Transaction ID : SA11AI.45690

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

B. MR J D WALKER 761

Mailing Address 6917 BAL LAKE DR

City State Zip Code
 FORT WORTH TX 76116

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 02 2014

Transaction ID : SA11AI.45408

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. MR J D WALKER 761

Mailing Address 6917 BAL LAKE DR

City State Zip Code
 FORT WORTH TX 76116

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 06 2014

Transaction ID : SA11AI.45407

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

65.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM WALTERS 972

Mailing Address 4624 SW ILLINOIS ST

City
PORTLAND

State Zip Code
OR 97221

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11AI.45422

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

B. MR WILLIAM WALTERS 972

Mailing Address 4624 SW ILLINOIS ST

City
PORTLAND

State Zip Code
OR 97221

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45691

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

C. JOHN T WARD 926

Mailing Address 4800 SURREY DR

City
CORONA DEL MAR

State Zip Code
CA 92625

FEC ID number of contributing
federal political committee.

C

Name of Employer

WARD STABLES INC

Occupation

HORSE TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45694

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS ANNIE WEEKS 352

Mailing Address 3411 ROCK LN

City
IRONDALE

State Zip Code
AL 35210

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.45447

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MRS BETTY L WHEELER 986

Mailing Address 1111 NW 102ND CIR

City
VANCOUVER

State Zip Code
WA 98685

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11AI.45471

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. MRS BETTY L WHEELER 986

Mailing Address 1111 NW 102ND CIR

City
VANCOUVER

State Zip Code
WA 98685

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.45695

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 96
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS SARAH YODER 381

Mailing Address 3983 BAYLISS AVE

City
MEMPHIS

State Zip Code
TN 38122

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2014

Transaction ID : SA11AI.45568

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. MR ALLEN R YOUNG 923

Mailing Address 7892 LA CRESTA ST

City
HIGHLAND

State Zip Code
CA 92346

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11AI.45577

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

70.00

TOTAL This Period (last page this line number only)..... ►

23380.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 96
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW RD
SUITE 504

City State Zip Code
STERLING VA 20166

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 15 2014

Transaction ID : SA15.45601

Amount of Each Receipt this Period

54.00

REFUND

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.00

54.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. CAPITOL CAGING LLC

003

3500.00

VIGOP

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)
B. CAPITOL CAGING LLC

MM / DD / YYYY

001

660.45

VIGOP

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)
C. CAPITOL CAGING LLC

001

41.21

VIGOP

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

SUBTOTAL of Disbursements This Page (optional).....

4201.66

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICESMailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	2			2	0	1	4		

Transaction ID : SB21B.45608

Amount of Each Disbursement this Period

12804.35

Full Name (Last, First, Middle Initial)

B. CENTURY DATA MAILING SERVICESMailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	2			2	0	1	4		

Transaction ID : SB21B.45610

Amount of Each Disbursement this Period

5205.44

Full Name (Last, First, Middle Initial)

C. CENTURY DATA MAILING SERVICESMailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	9			2	0	1	4		

Transaction ID : SB21B.45609

Amount of Each Disbursement this Period

17889.21

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35899.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. CENTURY DATA SYSTEMS CORP

001

1933.84

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

B. CONSOLIDATED MAILING SERVICES

003

2329.05

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

C. CONSOLIDATED MAILING SERVICES

Three digital displays showing the date 10/09/2014 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '09' with 'D' indicators above it. The third display shows '2014' with 'Y' indicators above it.

003

11517.80

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

15780.69

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 96

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CONSOLIDATED MAILING SERVICESMailing Address 504 SHAW RD
SUITE 504

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SB21B.45614

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement
VIGOP LIST ENHANCEMENT

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2014

Transaction ID : SB21B.45615

Amount of Each Disbursement this Period

322.72

Full Name (Last, First, Middle Initial)

C. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement
VIGOP LIST ENHANCEMENT

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SB21B.45616

Amount of Each Disbursement this Period

322.37

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10645.09

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Mailing Address 11325 RANDOM HILLS DRIVE #806

City	State	Zip Code
FAIRFAX	VA	22040

Transaction ID : SB21B.45617Purpose of Disbursement
SERVICE CHARGE

001

Amount of Each Disbursement this Period

Candidate Name

VIGOPCategory/
Type

225.55

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Mailing Address 11325 RANDOM HILLS DRIVE #806

City	State	Zip Code
FAIRFAX	VA	22040

Transaction ID : SB21B.45618Purpose of Disbursement
SERVICE CHARGE

001

Amount of Each Disbursement this Period

Candidate Name

VIGOPCategory/
Type

14.82

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Mailing Address 11325 RANDOM HILLS DRIVE #806

City	State	Zip Code
FAIRFAX	VA	22040

Transaction ID : SB21B.45619Purpose of Disbursement
SERVICE CHARGE

001

Amount of Each Disbursement this Period

Candidate Name

VIGOPCategory/
Type

123.14

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

363.51

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	6			2	0	1	4		

Mailing Address 11325 RANDOM HILLS DRIVE #806

City	State	Zip Code
FAIRFAX	VA	22040

Transaction ID : SB21B.45620Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Amount of Each Disbursement this Period

Candidate Name

VIGOPCategory/
Type

104.75

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	6			2	0	1	4		

Mailing Address 11325 RANDOM HILLS DRIVE #806

City	State	Zip Code
FAIRFAX	VA	22040

Transaction ID : SB21B.45621Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Amount of Each Disbursement this Period

Candidate Name

VIGOPCategory/
Type

25.00

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	6			2	0	1	4		

Mailing Address 11325 RANDOM HILLS DRIVE #806

City	State	Zip Code
FAIRFAX	VA	22040

Transaction ID : SB21B.45622Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Amount of Each Disbursement this Period

Candidate Name

VIGOPCategory/
Type

63.50

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

193.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. LEGACY LIST MANAGEMENT CORPMailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP LIST RENTALS

003

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	2			2	0	1	4		

Transaction ID : SB21B.45626

Amount of Each Disbursement this Period

5793.90

Full Name (Last, First, Middle Initial)

B. LEGACY LIST MANAGEMENT CORPMailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP LIST RENTALS

003

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	2			2	0	1	4		

Transaction ID : SB21B.45633

Amount of Each Disbursement this Period

2284.00

Full Name (Last, First, Middle Initial)

C. LEGACY LIST MANAGEMENT CORPMailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP LIST RENTALS

003

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	9			2	0	1	4		

Transaction ID : SB21B.45630

Amount of Each Disbursement this Period

375.48

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8453.38

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. PATTON-KIEHL GROUP INC

Date of Disbursement

Transaction ID : SB21B.45629

003

Amount of Each Disbursement this Period

Category/
Type

731.25

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. SIMPKINS ESCROW SERVICES LLC

Date of Disbursement

MM / DD / YYYY

Mailing Address 29*243 ST JUST DR

City	State	Zip Code
UNIONVILLE	VA	22567

Transaction ID : SB21B.45628

Purpose of Disbursement

ESCROW SERVICES

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

187.54

Office Sought:

	House
	Senate
	President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
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Purpose of Disbursement	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
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67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Candidate Name _____

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

	House
	Senate
	President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....

918.79

TOTAL This Period (last page this line number only).....

88284.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 96

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. EMMER FOR CONGRESS

Mailing Address PO BOX 998

City ANOKA	State MN	Zip Code 55303
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Purpose of Disbursement
FEDERAL CONTRIBUTION

011

Candidate Name

THOMAS EARL EMMER JRCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SB23.45638

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MARILINDA GARCIA FOR CONGRESS

Mailing Address PO BOX 821

City SALEM	State NH	Zip Code 03079
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Purpose of Disbursement
FEDERAL CONTRIBUTION

011

Candidate Name

MARILINDA GARCIACategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SB23.45637

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. ZINKE FOR CONGRESS

Mailing Address PO BOX 1596

City HELENA	State MT	Zip Code 59624
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Purpose of Disbursement
FEDERAL CONTRIBUTION

011

Candidate Name

RYAN K ZINKECategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: MT District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SB23.45641

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

3000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 91 OF 96

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BASE CONNECT INCNature of Debt (Purpose):
DIRECT MAIL - CREATIVEMailing Address 1155 - 15TH STREET
SUITE 410City State Zip Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

80458.40

Transaction ID : SD10.7789

Amount Incurred This Period

0.00

Payment This Period

9269.65

Outstanding Balance at Close of This Period

71188.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CAPITOL CAGING LLCNature of Debt (Purpose):
CAGING SERVICESMailing Address 504 SHAW RD
SUITE 504City State Zip Code
STERLING VA 20166

Outstanding Balance Beginning This Period

660.45

Transaction ID : SD10.37640

Amount Incurred This Period

3541.21

Payment This Period

4201.66

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CENTURY DATA SYSTEMS CORPNature of Debt (Purpose):
DATA PROCESSINGMailing Address 1155 - 15TH STREET
SUITE 410City State Zip Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

12574.60

Transaction ID : SD10.7791

Amount Incurred This Period

0.00

Payment This Period

1933.84

Outstanding Balance at Close of This Period

10640.76

1) **SUBTOTALS** This Period This Page (optional)..... ►

81829.51

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 92 OF 96

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

COLORTREE

Nature of Debt (Purpose):

DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 2519 BRITTONS HILL RD

City State

RICHMOND

Zip Code

VA

23230

Outstanding Balance Beginning This Period

6520.87

Transaction ID : SD10.37641

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6520.87

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CONSOLIDATED MAILING SERVICES

Nature of Debt (Purpose):

DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 504 SHAW RD

SUITE 504

City State

STERLING

Zip Code

VA

20166

Outstanding Balance Beginning This Period

104372.67

Transaction ID : SD10.7792

Amount Incurred This Period

0.00

Payment This Period

23846.85

Outstanding Balance at Close of This Period

80525.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DONOR BUREAU

Nature of Debt (Purpose):

LIST ENHANCEMENT SERVICES

Mailing Address 1900 N CULPEPPER ST

City

ARLINGTON

State

VA

Zip Code

22207

Outstanding Balance Beginning This Period

4112.21

Transaction ID : SD10.7798

Amount Incurred This Period

0.00

Payment This Period

645.09

Outstanding Balance at Close of This Period

3467.12

1) **SUBTOTALS** This Period This Page (optional)..... ►

90513.81

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 93 OF 96

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

INTEGRAM

Nature of Debt (Purpose):

DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 8421 HILLTOP RD

City State

FAIRFAX

Zip Code

VA

22031

Outstanding Balance Beginning This Period

7185.41

Transaction ID : SD10.37645

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7185.41

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LEGACY LIST MANAGEMENT CORP

Nature of Debt (Purpose):

DIRECT MAIL - LIST RENTALS

Mailing Address 1155 - 15TH STREET

SUITE 410

City State

WASHINGTON

Zip Code

DC

20005

Outstanding Balance Beginning This Period

40205.93

Transaction ID : SD10.15277

Amount Incurred This Period

0.00

Payment This Period

9130.31

Outstanding Balance at Close of This Period

31075.62

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MACKENZIE & COMPANY

Nature of Debt (Purpose):

CONSULTING - COMPLIANCE

Mailing Address 2776 S ARLINGTON MILL DR

#806

City

ARLINGTON

State

VA

Zip Code

22206

Outstanding Balance Beginning This Period

6379.00

Transaction ID : SD10.7794

Amount Incurred This Period

0.00

Payment This Period

944.20

Outstanding Balance at Close of This Period

5434.80

1) **SUBTOTALS** This Period This Page (optional)..... ►

43695.83

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 94 OF 96

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MDI IMAGING & MAIL

Nature of Debt (Purpose):

DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 21721-A FILIGREE CT

City State

ASHBURN

Zip Code

VA

20147

Outstanding Balance Beginning This Period

2341.72

Transaction ID : SD10.42380

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2341.72

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RHA MARKETING

Nature of Debt (Purpose):

DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 1272 CORPORATE PARK RD

City State

FOREST

Zip Code

VA

24551

Outstanding Balance Beginning This Period

3916.72

Transaction ID : SD10.37648

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3916.72

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SIMPKINS ESCROW SERVICES LLC

Nature of Debt (Purpose):

ESCROW SERVICES

Mailing Address 29*243 ST JUST DR

City

UNIONVILLE

State

VA

Zip Code

22567

Outstanding Balance Beginning This Period

2617.58

Transaction ID : SD10.37650

Amount Incurred This Period

0.00

Payment This Period

187.54

Outstanding Balance at Close of This Period

2430.04

1) **SUBTOTALS** This Period This Page (optional)..... ►

8688.48

2) **TOTALS** This Period (last page this line number only)..... ►

224727.63

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

224727.63

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 95 OF 96
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00553560</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee THE STRATEGY GROUP COMPANY			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 15 / 2014</div>		
Mailing Address 7669 STAGERS LOOP			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">8000.00</div>		
City DELAWARE		State OH	Zip Code 43015		Transaction ID : SE.37684
Purpose of Expenditure LIVE ADVOCACY & GOTV CALLS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 14 / 2014</div>	
Name of Federal Candidate MARILINDA GARCIA			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee THE STRATEGY GROUP COMPANY			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 15 / 2014</div>		
Mailing Address 7669 STAGERS LOOP			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">8000.00</div>		
City DELAWARE		State OH	Zip Code 43015		Transaction ID : SE.37687
Purpose of Expenditure LIVE ADVOCACY & GOTV CALLS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 14 / 2014</div>	
Name of Federal Candidate MIA LOVE			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">16000.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <div style="border-top: 1px solid black; width: 100%;"></div>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 20 / 2014</div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 96 OF 96
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00553560</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee THE STRATEGY GROUP COMPANY			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 15 / 2014</div>		
Mailing Address 7669 STAGERS LOOP			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">8000.00</div>		
City DELAWARE		State OH	Zip Code 43015		Transaction ID : SE.37689
Purpose of Expenditure LIVE ADVOCACY & GOTV CALLS		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 14 / 2014</div>	
Name of Federal Candidate TIMOTHY E SCOTT			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">8000.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee THE STRATEGY GROUP COMPANY			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 15 / 2014</div>		
Mailing Address 7669 STAGERS LOOP			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">8000.00</div>		
City DELAWARE		State OH	Zip Code 43015		Transaction ID : SE.37694
Purpose of Expenditure LIVE ADVOCACY & GOTV CALLS		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 14 / 2014</div>	
Name of Federal Candidate WILLIAM HURD			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">8000.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">16000.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">32000.00</div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature SCOTT B MACKENZIE			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 20 / 2014</div>		
[Electronically Filed]					